

28-10-63

GOOLE
RURAL DISTRICT COUNCIL



ANNUAL REPORT
OF THE
Medical Officer of Health

1962

GOOLE :
GOOLE TIMES COMPANY LIMITED
1963

GOOLE
RURAL DISTRICT COUNCIL

Chairman :
Councillor H. S. WOOD, J.P.

Vice-Chairman :
Councillor C. W. HARTLEY.

Medical Officer of Health :
S. KENNAUGH APPLETON,
S.B.ST.J., M.D., CH.B., D.P.H., D.T.M.

Deputy Medical Officer of Health :
MURIEL J. LOWE, M.B., B.S., M.R.C.S., L.R.C.P., D.P.H., D.C.H.

Public Health Inspector :
J. ALLAN POTTS, A.M.I.S.E., M.S.I.A.

To the Chairman and Members of the
GOOLE RURAL DISTRICT COUNCIL

GENTLEMEN,

I have the honour to present to you my Sixteenth Annual Report on the health of the District and the work of the Health Department for the year 1962.

The Birth Rate was 16·6 per thousand population (Adjusted Birth Rate 16·3), which is below the W.R. Rural District Aggregate Rate of 18·4. The Rate for England and Wales was 18·0.

The Crude Death Rate was 10·0 (Adjusted Death Rate 10·6). The W.R. Rural Rate was 10·2 and that for England and Wales 11·9.

Of the 87 deaths, 38 (35%) occurred at the age of 75 years and over; of these, 10 were over 85 years and 2 over 90 years.

There were 3 infant deaths giving a Rate of 20·8 per thousand live births. The W.R. Rural Rate was 24·6 and the Rate for England and Wales was 21·4.

Infectious disease notifications totalled 120. Of these, measles accounted for 116. The District has been free from diphtheria for nineteen years.

Tuberculosis :

The virtual elimination of tuberculosis in cattle, coupled with the heat treatment of milk, has removed the once potent source of infection in children. The steady decrease in the number of new cases of tuberculosis further diminishes a source of infection in the community. This is well demonstrated by reference to the B.C.G. vaccination of children against tuberculosis.

In 1955 when the scheme was introduced in the District, 40% of children tested in their fourteenth year showed a "positive Mantoux test," that is, evidence of a sub-clinical infection with the tubercle organism from some source in their earlier years of life. In 1962 only 15·9% of children tested showed this evidence of earlier contact with tuberculosis.

However, there still remains another possible source of infection to be dealt with, namely, "grandpa's cough." It is believed that an unknown but significant amount of chronic bronchitis in the elderly is tuberculous in origin and, therefore, an unrecognised source of danger to others.

Every doctor knows that any lump developing in the body in middle age and later years should be regarded as malignant until proved to be otherwise. I would ask all doctors and intelligent laymen to regard every case of chronic bronchitis as tuberculous until proved to be otherwise. In this way one of the remaining bastions of a diminishing but still dangerous disease could be brought under control.

I commend to you the very readable Annual Report of the Surveyor and Public Health Inspector, and particularly his remarks about building and the acquisition of land. The position can be summed up thus—there would be more houses if there was less red tape.

Finally, I place on record my thanks for the continued support of the Members and Officers of the Council, and to the Voluntary Committees for their services at the Clinics.

I remain,

Your obedient servant,

S. KENNAUGH APPLETON,

Medical Officer of Health.

July, 1963.

1962

GENERAL STATISTICS

Area of Rural District	...	...	...	...	38,238 acres
Population (mid-1962)	...	...	...	...	8,660
Number of Inhabited Houses	...	...	...	...	2,927
Rateable Value (1/4/63)	...	...	...	...	£174,956
Estimated Product of Penny Rate (1/4/63)	...	...	...	...	£693/6/9

VITAL STATISTICS

		GOOLE R.D.	Aggregate West Riding R.D.s	West Riding Admin. County	England & Wales & Wales (provi- sional)
BIRTH RATE					
(per 1,000 population)	...	16.6	18.4	17.8	18.0
CRUDE DEATH RATES					
(per 1,000 population)					
All causes	... ..	10.0	10.2	12.0	11.9
Infective and Parasitic Diseases	... ..	0	0.04	0.04	—
Respiratory Tuberculosis	...	0	0.03	0.05	0.06
Other forms of Tuberculosis	... ..	0.12	0	0.01	0.01
Respiratory Diseases excluding Respiratory Tuberculosis)	... ..	1.04	1.25	1.52	—
Cancer	... ..	2.19	1.65	2.0	2.18
Heart and Circulatory Diseases	... ..	3.23	3.87	4.56	—
Vascular Lesion of Nervous System	... ..	1.27	1.52	1.84	—
INFANT MORTALITY					
(Deaths under one year per 1,000 live births)	...	20.8	24.6	23.3	21.4
Stillbirths	... ..	36.2	19.6	18.5	18.1
PERINATAL MORTALITY	...	66.2	33.6	31.5	—
MATERNAL MORTALITY					
(Deaths of mothers in childbirth per 1,000 total births)	... ..	0	0.45	0.20	0.35

COMPARABILITY FACTORS

For Births	...	0.98	Adjusted Birth Rate	...	16.3
For Deaths	...	1.06	Adjusted Death Rate	...	10.6

BIRTHS

				Male.	Female.	Total.
LIVE BIRTHS:						
Legitimate	...	...	...	72	69	141
Illegitimate	...	...	...	1	2	3
				—	—	—
Total	...	...	...	73	71	144
STILLBIRTHS	...	...	...	3	4	7

**Birth and Death Rates, 1962,
and Mean Rates for Decennial Periods**

BIRTH RATE—16·6

(per 1,000 population)

1901-1910	...	...	27·4	1931-1940	...	...	16·2
1911-1920	...	...	23·6	1941-1950	...	...	18·3
1921-1930	...	...	22·1	1951-1960	...	...	15·4

STILLBIRTHS—46·4

(per 1,000 total births)

1901-1910	...	...	—	1931-1940	...	...	39·1
1911-1920	...	...	—	1941-1950	...	...	33·2
1921-1930	...	...	—	1951-1960	...	...	25·6

ILLEGITIMATE BIRTHS—19·9

(per 1,000 total births)

1901-1910	...	...	67·8	1931-1940	...	...	49·3
1911-1920	...	...	88·6	1941-1950	...	...	71·6
1921-1930	...	...	72·1	1951-1960	...	...	46·7

INFANTILE MORTALITY—20·8

(per 1,000 live births)

1901-1910	...	...	134·7	1931-1940	...	...	59·0
1911-1920	...	...	100·4	1941-1950	...	...	43·3
1921-1930	...	...	82·6	1951-1960	...	...	33·9

NEONATAL MORTALITY—20·8

(deaths in first month per 1,000 live births)

1901-1910	...	...	24·5	1931-1940	...	...	26·6
1911-1920	...	...	25·5	1941-1950	...	...	19·8
1921-1930	...	...	22·3	1951-1960	...	...	22·8

PERINATAL MORTALITY—66·2

(stillbirths and first week deaths per 1,000 total births)

1931-1940	...	...	64·7	1951-1960	...	...	45·1
1941-1950	...	...	53·1				

TOTAL DEATH RATE—10·0

(per 1,000 population)

1901-1910	...	...	15·7	1931-1940	...	...	11·5
1911-1920	...	...	14·7	1941-1950	...	...	11·3
1921-1930	...	...	12·1	1951-1960	...	...	10·2

DISEASES OF HEART AND CIRCULATION—3·23

1901-1910	...	...	1·71	1931-1940	...	...	3·73
1911-1920	...	...	1·03	1941-1950	...	...	3·54
1921-1930	...	...	2·22	1951-1960	...	...	3·80

VASCULAR DISEASES OF CENTRAL NERVOUS SYSTEM —1·27

1901-1910	...	...	—	1931-1940	...	...	0·76
1911-1920	...	...	—	1941-1950	...	...	0·97
1921-1930	...	...	0·79	1951-1960	...	...	1·13

MALIGNANT NEOPLASMS—2·19

1901-1910	...	...	0·88	1931-1940	...	...	1·28
1911-1920	...	...	1·04	1941-1950	...	...	1·70
1921-1930	...	...	1·37	1951-1960	...	...	1·82

RESPIRATORY DISEASES—1·04

1901-1910	...	...	2·48	1931-1940	...	...	0·77
1911-1920	...	...	1·88	1941-1950	...	...	0·95
1921-1930	...	...	1·45	1951-1960	...	...	1·07

INFECTIVE AND PARASITIC DISEASES—0

1901-1910	...	...	1·22	1931-1940	...	...	0·23
1911-1920	...	...	1·26	1941-1950	...	...	0·15
1921-1930	...	...	0·57	1951-1960	...	...	0·06

RESPIRATORY TUBERCULOSIS—0

1901-1910	...	...	0·73	1931-1940	...	...	0·33
1911-1920	...	...	0·67	1941-1950	...	...	0·37
1921-1930	...	...	0·61	1951-1960	...	...	0·06

NON-RESPIRATORY TUBERCULOSIS—0·12

1901-1910	...	...	0·70	1931-1940	...	...	0·13
1911-1920	...	...	0·30	1941-1950	...	...	0·09
1921-1930	...	...	0·29	1951-1960	...	...	0·02

MATERNAL MORTALITY—0

(per 1,000 total births)

1901-1910	...	...	5·33	1931-1940	...	...	4·54
1911-1920	...	...	4·74	1941-1950	...	...	1·17
1921-1930	...	...	3·92	1951-1960	...	...	0·63

CAUSES OF DEATH

1962

						Male.	Female.	Total.
Influenza	...	...	...	...	...	0	0	0
Tuberculosis (Respiratory)	...	...	...	...	...	0	0	0
Tuberculosis (other forms)	...	...	...	...	...	1	0	1
Malignant Neoplasms	...	...	...	...	...	8	11	19
Diabetes	...	...	...	...	...	0	2	2
Vascular Lesions of Nervous System	...	...	...	...	...	8	3	11
Heart Disease	...	...	...	...	...	14	10	24
Other Disease of Circulatory System	...	...	...	...	...	4	0	4
Bronchitis	...	...	...	...	...	0	2	2
Other Respiratory Diseases	...	...	...	...	...	1	0	1
Ulcer of Stomach and Duodenum	...	...	...	...	...	0	0	0
Hyperplasia of Prostate	...	...	...	...	...	1	—	1
Leukæmia	...	...	...	...	...	0	0	0
Nephritis	...	...	...	...	...	0	0	0
Homicide	...	...	...	...	...	1	0	1
Congenital Causes	...	...	...	...	...	1	1	2
Pneumonia	...	...	...	...	...	4	2	6
Suicide	...	...	...	...	...	0	0	0
Motor Vehicle Accidents	...	...	...	...	...	2	0	2
Other Accidents	...	...	...	...	...	0	1	1
All Other Causes	...	...	...	...	...	3	7	10
						—	—	—
Total	...	...	...	...	...	48	39	87

TUBERCULOSIS

New cases during 1962

						Male.	Female.	Total.
Pulmonary	...	...	...	...	...	0	0	0
Non-Pulmonary	...	...	...	...	...	0	0	0
Total cases on the Register:								
Pulmonary	...	...	...	...	...	16	29*	45
Non-Pulmonary	...	...	...	...	...	4	2†	6

* Includes 6 cases in a residential institution in the District.

† Includes 2 cases in a residential institution in the District.

INFANTILE MORTALITY, 1962

Causes of Death in Age Groups

	Under 1 week.	1 to 2 weeks.	2 to 3 weeks.	2 to 4 weeks.	1 to 3 months.	2 to 6 months.	6 to 9 months.	9 to 12 months.	Total.
Birth Injury ...	1								1
Congenital Defects	2								2
Total ...	3								3

Cases of Infectious Disease notified during 1962

				No. of cases notified								
				At all ages	According to Age							
					Under 1	1 to 4	5 to 14	15 to 24	25 to 44	45 to 64	Over 64	
Smallpox									
Diphtheria									
Erysipelas									
Scarlet Fever	2			2					
Enteric Fevers									
Puerperal Pyrexia									
Cerebro-spinal Meningitis									
Ophthalmia Neonatorum									
Pulmonary Tuberculosis									
Other forms of Tuberculosis									
Measles	116	5	48	62	1				
Primary Pneumonia	2		1			1			
Influenzal Pneumonia									
Whooping Cough									
Dysentery									
Acute Poliomyelitis (P)									
Food Poisoning									
Totals	120	5	49	64	1	1			

FACTORIES ACTS, 1937 to 1959

Part I. — Inspections

Premises.	No. on Register	Inspections	Written Notices	Occupiers Prosecuted
Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by L.A.s	4	2	0	0
Factories not included above in which Section 7 is enforced by L.A.s	27	18	0	0
Other premises in which Section 7 is enforced by L.A.s	7	26	0	0
Total ..	38	46	0	0

Part I. — Defects

Particulars.	Found	Remedied	Referred to H.M.I.	Referred by H.M.I.	Prosecutions instituted
Want of cleanliness (S.1) ..	0	0	0	0	0
Overcrowding (S.2)	0	0	0	0	0
Unreasonable temperature (S.3)	0	0	0	0	0
Inadequate ventilation (S.4)	0	0	0	0	0
Ineffective drainage of floors (S.6)	0	0	0	0	0
Sanitary conveniences insufficient, unsuitable or defective (S.7)	3	3	0	0	0
Other offences	0	0	0	0	0
Total ..	3	3	0	0	0

Part VIII.: Outworkers — Nil.

MASS RADIOGRAPHY

The Miniature Radiography Unit did not visit the District during 1962.

NATIONAL ASSISTANCE ACTS, 1948 and 1951

A 75 years old woman in poor health and living in insanitary conditions was removed to St. John's Hospital.

WEST RIDING COUNTY DIVISIONAL HEALTH

SERVICES IN GOOLE R.D., 1962

The Public Health Nursing Staff in this Division no longer works according to County District boundaries. Most of the figures in the following summaries refer to Goole R.D., but in certain cases the figures are those for the Rural District and Goole Borough combined, or for Division No. 10 as a whole.

1. BIRTHS: Live 144 ; Stillbirths 7 ; Illegitimate 3 ; Males 73 ; Female 71.

2. PREMATURE BABIES—Babies weighing 5½lb. or less at birth:

(i) Born at home	...	...	...	2	Stillborn	0
(ii) Born in Hospital	...	...	...	5	„	4
Total				7	„	4

3. HEALTH VISITING (for Division No. 10 as a whole):

	First Visits.	Other Visits.	Total.
Expectant Mothers	250	165	415
Children under 1 year	833	3890	4723
Children between 1 and 5	—	4130	4130
Other cases	—	3032	3032
Ineffective visits	182	2087	2269
Total	1265	13304	14569

4. CHILD WELFARE CLINICS:

(a) Total number of children under 5 years of age who first attended the Clinics during the year and who at the date of their first attendance were:—

Under 1 year ... 89

(b) Total number of children under 5 years of age who attended the Clinics during the year and who at the end of the year were:—

(i) Under 1 year ... 65

(ii) Over 1 year ... 163

Number of sessions held:—

SNAITH	...	...	...	...	50
Total attendance	...	...	...	...	1476
Average per session	...	...	...	...	29.5
SWINEFLEET	...	...	...	...	48
Total attendance	...	...	...	...	928
Average per session	...	...	...	...	27.7

Of the above, 43 Selby Rural children made 260 visits to Goole Rural Clinics and 61 Goole Rural children made 490 visits to Goole Borough Clinics.

5. SCHOOL HEALTH SERVICE:

Attendances at School Clinic	...	...	...	...	101
Number attending Pædiatric Consultant	...	...	...	...	8
Number attending County Oculist	...	...	...	...	157
Number prescribed Spectacles	...	...	...	...	51
Number attending Speech Therapy	...	...	...	...	4
Number inspected in school by School M.O.	...	...	...	...	379
Number inspected in school by School Nurse	...	...	...	...	3327
Number of Verminous Heads	...	...	...	...	26
Tests for Subnormality	...	...	...	...	2
Re-examinations	...	...	...	...	4
Reported to M.D. Authority as ineducable	...	...	...	...	1
Recommended for Residential School	...	...	...	...	0
Attending Residential Schools	...	...	...	...	6
Reported to M.D. Authority for supervision	...	...	...	...	3

The following defects were found at Medical Inspections:

					Requiring treatment.	For observation.
Verminous heads	...	...	...	...	26	0
Skin	...	...	...	...	2	2
Vision	...	...	...	...	16	20
Other eye conditions	...	...	...	...	2	3
Hearing	...	...	...	...	0	1
Other ear defects	...	...	...	...	3	0
Nose and Throat	...	...	...	...	4	6
Speech	...	...	...	...	0	9
Cervical glands	...	...	...	...	1	5
Heart and circulation	...	...	...	...	0	2
Lungs	...	...	...	...	0	3
Developmental	...	...	...	...	0	0
Orthopædic	...	...	...	...	4	12
Nervous system	...	...	...	...	3	2
Psychological	...	...	...	...	1	0
Other conditions	...	...	...	...	0	0

SCHOOL DENTAL SERVICE (Division No. 10 as a whole).

Number inspected	...	...	...	...	...	4601
Requiring treatment	...	...	...	...	...	3425
Offered treatment	...	...	...	...	...	2118
Treated	...	...	...	...	...	1487

6. MATERNITY SERVICES:

ANTE-NATAL CLINIC:

Snaith. Swinefleet.

Number of patients attending	...	...	25	15
Total number of attendances	...	...	128	36
Number of sessions held	...	...	25	25
Average attendance per session	...	...	5	1.4

Included in the above are 5 expectant mothers from Selby Rural District, who made 31 visits to the Snaith Clinic. In addition, 30 expectant mothers made 60 attendances at the Goole Ante-Natal Clinic.

MOTHERS CONFINED IN HOSPITAL:

Goole Maternity Home	...	...	...	...	...	21
Leeds Hospitals	...	...	...	...	...	1
Wakefield Hospitals	...	...	...	...	...	35
Other Hospitals	...	...	...	...	...	4
Total						61

COUNTY MIDWIVES:

There were 88 domiciliary confinements in the Rural District during 1962.

The following summary of the work of the County Midwives is for Division No. 10 as a whole:—

Number of Midwives	...	...	...	...	...	9
Number of cases	...	...	...	...	...	414
Number of visits	...	...	...	...	...	12140
Gas and air analgesia	...	...	...	...	...	24
Trilene analgesia	...	...	...	...	...	303

7. HOME NURSING (Division No. 10 as a whole):—

Number of Nurses	...	...	...	...	...	6
Number of cases completed	...	...	...	...	...	286
Number of visits	...	...	...	...	...	14022

8. HOME HELPS:

Home Helps were employed for 77,914 hours attending cases in the Division.

They attended the following cases in Goole R.D.:

Maternity	...	...	6	Chronic Sick (under 65)	...	4
Chronic Sick (over 65)	...	...	54	Other	...	4

9. IMMUNISATION AGAINST DIPHTHERIA—during 1962:

Children under 5 years	...	...	...	...	...	103
Children over 5 years	...	...	...	...	...	29
Total						132
Booster Doses	...	...	...	...	...	66
Total						198

Total number of children under 15 years of age who have been immunised up to the 31st December, 1962:—

Age—Years	0—1	1—4	5—9	10—14	Total under 15
Number	42	384	473	579	1478
Percentage	61		71		67

10. IMMUNISATION AGAINST WHOOPING COUGH:

					During 1962.	Up to Dec. 1962
Under 6 months	...	...	...	...	20	
6 months to 1 year	...	...	...	...	22	
						42
1—2 years	...	...	...	...	51	
2—3 years	...	...	...	...	1	
3—4 years	...	...	...	...	2	
						356
					96	398

11. B.C.G. VACCINATION OF SCHOOL CHILDREN (13 years of age):

Number of acceptances in 1962	...	...	65	
Pre-Vaccination Tuberculin Tests	...	...	63	
Positive (not requiring vaccination)	...	10	(15·9%)	
Negative (requiring vaccination)	...	53	(84·1%)	
Number vaccinated with B.C.G.	...	...	52	
Number re-tested after 12 months	...	...	48	

12. VACCINATION AGAINST POLIOMYELITIS:

Total registered to 31st December, 1962	...	...	3444
Vaccinations completed ....	...	...	3423

13. MENTAL HEALTH:

Mental Health Act, 1959.

The number of persons under care and guidance at the end of 1962 were as follows:—

					Male.	Female.	Total
Psychopathic	...	...	...	...	—	—	—
Subnormal	...	...	...	...	9	7	16
Severely Subnormal	...	...	...	...	5	5	10
Mentally ill	...	...	...	...	3	4	7

Admission to Mental Hospitals by the Mental Welfare Officers during 1962 were as follows:

					Male.	Female.	Total
Emergency Admissions	...	...	...	...	2	2	4
Admissions for Observation	...	...	...	...	—	3	3
Admissions for Treatment	...	...	...	...	—	2	2
Informal Admissions	...	...	...	...	6	3	9

PUBLIC HEALTH DIVISION No. 10

The County Districts forming Division No. 10 are:—

Goole Borough (1,267 acres)	Selby Urban (3,883 acres)
Goole Rural (38,238 acres)	Selby Rural (33,304 acres)
Area of the Division	76,692 acres
Population (estimated mid-1962)	44,600
(Census 1961)	44,533

DIVISIONAL HEALTH OFFICE & STAFF :

6/7, Belgravia, Goole (Telephone Goole 936 & 123)

Divisional Medical Officer & Divisional School Medical Officer :
S. KENNAUGH APPLETON, S.B.ST.J., M.D., CH.B., D.P.H., D.T.M.

Senior Assistant County Medical Officer & School Medical
Officer :

MURIEL J. LOWE, M.B., B.S., M.R.C.S., L.R.C.P., D.P.H., D.C.H.

Assistant County Medical Officer & School Medical Officer :
EILEEN M. R. BELL-SYER, M.B., B.S.

School Dental Officers :

P. F. A. ELTOME, L.D.S.

M. R. HOLLINGS, B.SC.D., F.D.S.R.C.S. (ENG.)

Health Visitors and School Nurses :

Mrs. B. BEAL, Miss D. M. BUTLER, Mrs. M. DODSON,
Mrs. M. HARGREAVES, Mrs. M. KELLY, Mrs. L. PRATT,
Miss A. RIDSDALE, Miss D. M. ROBINSON,
Mrs. A. SUTHERLAND (part-time).

Home Nurses :

Mrs. H. B. BEAUMONT, Mrs. S. CLAYBOURN, Mrs. M. LUND,
Mrs. W. E. DUFFIN, Mrs. L. A. POLLARD, Mrs. J. SAWDON.

Domiciliary Midwives :

Miss L. ADDINALL, Miss CLAYTON, Miss I. CAMPBELL,
Miss H. ELLIS, Mrs. D. FRANKLIN, Mrs. M. E. HORNSHAW,
Mrs. A. G. HORSFIELD, Mrs. M. M. HUGHES,
Mrs. L. KITCHEN.

Mental Health Officers :

Mr. T. G. FOSTER, Mrs. M. MYERS.

Rawcliffe Training Centre :

Supervisor : Miss C. S. LOGAN.

Staff : Mrs. A. ALVEY, Mrs. E. GOODALL, Mr. R. C. HUNT,
Mrs. C. M. LAZENBY, Miss STOCKTON.

Speech Therapy : Vacant (Divisions 10, 11 and 12).

Welfare Officer : Mr. N. SUTCLIFFE.

Blind Welfare : Mrs. J. KILNER (Goole 937).

Clerical :

Senior Clerk : Mr. R. TOWELL.

Deputy Senior Clerk : Mr. H. DODSON.

Miss S. L. BRAMHAM, Mrs. M. E. BRYARS (part-time),
Mrs. B. BUCKLE, Miss F. A. CAMPBELL, Mr. J. LAWTON,
Mr. G. N. NOWILL, Mrs. J. NOWILL (part-time),
Miss J. E. SMAJE.

PUBLIC HEALTH INSPECTOR'S REPORT FOR 1962

To the Chairman and Members of the Goole Rural District Council

MR. CHAIRMAN, GENTLEMEN,

I have pleasure in presenting this Annual Report on that part of my duties dealing with Public Health for the year 1962.

The writing of the Annual Report is a task which I always approach with trepidation. The Report is, to most people, I suppose, a document to be quickly scanned through and then promptly forgotten. A copy of it remains on the office file, however, and it is to this record that future Members and Officials of this Council will turn to give them details of the situations in 1962, and the picture presented is much more enduring than the present reader or scribe !

It is a most interesting pastime to read through the old reports. How often does one smile at the changes that the past 60-odd years have brought about—and how often is one forced to laugh outright at the sight of words which are as true today as the day that they were written ! “The drains, on account of the contour of the district, have very slight fall ; a flushing wagon would be of great assistance in clearing them.” These words could appear in the current report without causing any comment other than perhaps that I was always harping on the need for a gully emptier. In actual fact it is an extract from Dr. Stedman's report for 1902. And this: “The condition of much of the property at Swinefleet is unsatisfactory.”—Dr. Hill, in 1914.

One is tempted to remark that things never change, and that things now are just the same as then. But look again. With the ending of the 1914-18 war, the 1919 report contained the first section devoted to the work of the Surveyor and Sanitary Inspector. From this we learn that there existed 2,066 houses in the district for a population of 8,518. There are now 3,082 houses for 8,660 persons. An even more startling change is seen by comparing the number of plans dealt with by the Council: for the two years 1919 and 1920 there were submitted plans for 1 new house, 4 other buildings and alterations to 4 buildings. The comparable statistics for 1962 are: 66 new houses, 41 other buildings and 30 alterations. Thus, the pattern of work changes but the basic problems remain, and the ultimate goal is always the same—the highest possible standard of health and comfort for the public.

My thanks are due, as always, to my staff for their help and forbearance over the past year.

Yours faithfully,

J. ALLAN POTTS,

Surveyor and Public Health Inspector.

HOUSING.

During the year the Council completed 32 houses and 27 private houses were built. For the purposes of comparison the figures for the 10 previous years are given:—

					Council Houses.	Private Houses.
1961	...	...	...	...	—	17
1960	...	...	...	...	16	23
1959	...	...	...	...	6	10
1958	...	...	...	...	8	8
1957	...	...	...	...	8	8
1956	...	...	...	...	24	7
1955	...	...	...	...	4	—
1954	...	...	...	...	44	24
1953	...	...	...	...	16	6
1952	...	...	...	...	60	3

There is an urgent need for new housing in the district and many families are living in conditions which might have been tolerable 60 years ago but are a blot on the glossy veneer of life in the “telecarfrig” age.

The frustrating delays which occur in getting houses built are not caused by shortage of labour or materials in the building industry but stem purely from the administrative processes involved in obtaining land. Two Clearance Areas declared in the first half of 1961 are still awaiting purchase of the land, and it seems doubtful if a brick will be laid before the end of 1963. At the present rate of progress it takes four times as long to get a piece of land as it does to build the houses on it!

The answer to the situation is, I think, two-fold. Firstly, the Council must plan well ahead, and this is now being done. Secondly, as it takes just as long to acquire a site for 4 houses as it does for 40, and the cost per house should decrease with the number being built, it would appear good policy to have a good bite at the apple rather than prolonged nibbling where the demand exists.

During the year 17 houses were reported to the Council as being unfit for human habitation. Action was taken to secure the closing or demolition of 15 of these houses.

Twenty-five Improvement Grants were made during the year, the smallest number since 1958. The new measures announced by the Government towards the end of the year may bring about an increase in the number of grants made in the future, but it seems that the vast majority of the old rented houses will remain devoid of amenities until either new legislation forces owners to carry out improvements or the property deteriorates to the point where it becomes due for demolition.

The Council carried out grant-aided improvements to 9 of its old Council houses and found that the tenants greatly appreciated the work done.

DRAINAGE AND SEWERAGE.

The Rawcliffe and Rawcliffe Bridge sewerage schemes were practically completed by the end of the year, and the Rawcliffe works are in operation. As is to be expected, there are teething troubles and the final effluent is not yet up to standard; the biological breakdown of the sewage takes some time to get under way as the organisms have to build up from scratch.

The Hook sewage works are now running to capacity, and if any large scale development takes place in the village, as seems likely, there will have to be enlargement of the settling tanks and sludge bed capacities. In future schemes a more generous allowance for future expansion will have to be made, and it is most important that sufficient land be available for sizeable extensions to disposal works sites.

The Hook and Rawcliffe works and associated pumping stations are now maintained by a mobile mechanic, and this arrangement is proving much more satisfactory than part-time attendance by local roadmen. Modern plant and electrical equipment is too expensive, complicated (and potentially dangerous!) to entrust to anyone but a specialist.

The Airmyn sewerage scheme, and the combined western villages' scheme, have met with further setbacks and are no nearer construction than a year ago.

A further 200-yard section of the Reedness sewer was re-laid during the year.

REFUSE COLLECTION.

The Rawcliffe tip became full during the year, but no other land was available for tipping, and the level of the tip has had to be raised by bulldozing the lower parts out to make a new tipping area. This will give only a short extra life to the tip, but it is hoped that protracted negotiations with the River Board will soon enable us to tip into a spoil tip in the Gyne area.

It will be a great relief to finish off the present Rawcliffe tip for, being alongside the main road, and unfenced, it has for years been a dumping ground for all and sundry. Lorries going through the night dump loads of rubbish—often of a very offensive nature such as rotted vegetables or decaying slaughterhouse waste anywhere on the tip land—never on the tip face where it could be easily covered. At times this "pirate" tipping amounts to almost as much as that carried out by our own vehicles and certainly causes much more work. After we have finished tipping and levelled off the site we shall probably be troubled with this indiscriminate dumping, and there will have to be constant vigilance to find the persons concerned and take action against them.

